

Social Network

In this section we would like to find out about your "effective social network;" that is, the set of people with whom you currently exchange advice, companionship, information, etc. The following questions are designed to find out who is in your effective network, and something about your relationships with them.

In the space beside each line below, please write the first name and last initial of the relevant person(s) whom you:

Talk to when you are upset about a personal matter:

Ask for advice when making important decisions:

Turn to for reassurance and emotional support:

Discuss work with:

Go to movies or do things with:

Discuss or share a hobby or interest with:

Share your attitudes and values with:

Get intellectual stimulation and exchange from:

Ask to check the house if you are out of town:

Turn to for assistance with practical problems:

Would borrow money from:

Experience novelty, fun, or excitement with:

Feel has good connections or links to other groups:

Regard as a drain or would like to lose contact with:

Stay in contact with for old time's sake:

Listen to when they need to talk:

Assist with practical problems:

Lend money to:

Please enter up to ten of the people you have mentioned in the table below:

First name and last initial	Age	Sex	Occupation	Origin/nature of relationship
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Now please turn to the next page...

DAILY DIARY FORMS

Here are the diary forms we are asking you to complete for one week (7 consecutive days) before you visit the Institute. Remember to begin in time so that you finish all 7 days before your visit. Please find a quiet time at night to review the events of your day and complete the diary. For each day, there are two pages. One page is for you to describe a noteworthy positive event or experience that happened that day (i.e., the high point of that day). If nothing happened that you would characterize as positive, please describe the event that comes closest to being positive. The other page is for you to describe a noteworthy negative event that happened that day (i.e., the low point of that day). Again, if nothing truly negative happened, please describe the event that comes closest to being negative.

On each page, there is space for open-ended descriptions, in addition to some ratings. Feel free to write more on the back of each page if you wish. Although some of the following questions may seem similar to one another, they differ in important ways. Please fill the whole form out for 2 events each day.

For one of the days (the third day), we are also asking you to report the social interactions you had that day. This social interaction form needs to be completed only once.

Thank you so much for sharing your daily life with us!

POSITIVE EVENT FOR DAY 1: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how positive was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other: _____	___	___
Embarrassment	___	___	Love	___	___	Other: _____	___	___

NEGATIVE EVENT FOR DAY 1: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how negative was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other:_____	___	___
Embarrassment	___	___	Love	___	___	Other:_____	___	___

POSITIVE EVENT FOR DAY 2: ____ / ____ / ____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how positive was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other: _____	___	___
Embarrassment	___	___	Love	___	___	Other: _____	___	___

NEGATIVE EVENT FOR DAY 2: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how negative was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other: _____	___	___
Embarrassment	___	___	Love	___	___	Other: _____	___	___

POSITIVE EVENT FOR DAY 3: ____ / ____ / ____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how positive was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other: _____	___	___
Embarrassment	___	___	Love	___	___	Other: _____	___	___

NEGATIVE EVENT FOR DAY 3: ____ / ____ / ____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how negative was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	_____	_____	Fear	_____	_____	Pride	_____	_____
Anger	_____	_____	Frustration	_____	_____	Sadness	_____	_____
Anxiety	_____	_____	Guilt	_____	_____	Shame	_____	_____
Contempt	_____	_____	Interest	_____	_____	Surprise	_____	_____
Disgust	_____	_____	Joy	_____	_____	Other:_____	_____	_____
Embarrassment	_____	_____	Love	_____	_____	Other:_____	_____	_____

SOCIAL INTERACTIONS:

Please think back to all the people or groups of people you interacted with today, and describe up to ten of them in the chart below. If today was an especially unusual or atypical day for you, please fill this sheet out for yesterday or for another, more typical day.

TODAY'S DATE: ____ / ____ / ____

If you are filling this out for a different day, what day are you describing? ____ / ____ / ____

Instructions

Relationship Briefly indicate your relationship with this person or group (e.g., "husband," "coworker," etc.)

Total time. How much total time did you spend interacting with this person today? (indicate minutes/hours)

Rate these items on a scale from 0 to 6 (0 = not at all; 6 = a great deal):

How close? How close is your relationship with this person in general?

Intimate? How emotionally intimate was your interaction or interactions with this person today?

Informative? How informative or useful was your interaction or interactions with this person today?

Satisfying? Overall, how satisfied were you with your interaction or interactions with this person today?

<i>Your relationship in general</i>			<i>Today's interactions</i>			
First name and last initial (or group name)	Relationship	How close (0-6)	Total time in minutes	Intimate (0-6)	Inform. (0-6)	Satisfying (0-6)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

You may list additional people on the back if you wish.

POSITIVE EVENT FOR DAY 4: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how positive was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other:_____	___	___
Embarrassment	___	___	Love	___	___	Other:_____	___	___

NEGATIVE EVENT FOR DAY 4: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how negative was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other:_____	___	___
Embarrassment	___	___	Love	___	___	Other:_____	___	___

POSITIVE EVENT FOR DAY 5: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how positive was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	_____	_____	Fear	_____	_____	Pride	_____	_____
Anger	_____	_____	Frustration	_____	_____	Sadness	_____	_____
Anxiety	_____	_____	Guilt	_____	_____	Shame	_____	_____
Contempt	_____	_____	Interest	_____	_____	Surprise	_____	_____
Disgust	_____	_____	Joy	_____	_____	Other:_____	_____	_____
Embarrassment	_____	_____	Love	_____	_____	Other:_____	_____	_____

NEGATIVE EVENT FOR DAY 5: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how negative was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other:_____	___	___
Embarrassment	___	___	Love	___	___	Other:_____	___	___

POSITIVE EVENT FOR DAY 6: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how positive was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other: _____	___	___
Embarrassment	___	___	Love	___	___	Other: _____	___	___

NEGATIVE EVENT FOR DAY 6: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how negative was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other:_____	___	___
Embarrassment	___	___	Love	___	___	Other:_____	___	___

POSITIVE EVENT FOR DAY 7: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how positive was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. **(1 = not at all; 7 = a great deal)**

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	___	___	Fear	___	___	Pride	___	___
Anger	___	___	Frustration	___	___	Sadness	___	___
Anxiety	___	___	Guilt	___	___	Shame	___	___
Contempt	___	___	Interest	___	___	Surprise	___	___
Disgust	___	___	Joy	___	___	Other:_____	___	___
Embarrassment	___	___	Love	___	___	Other:_____	___	___

NEGATIVE EVENT FOR DAY 7: ____/____/____ (today's date)

Briefly describe the situation: (a) what happened; (b) when and where; and (c) who else was involved.

What were your thoughts and feelings during this event?

What was the outcome? How did you respond to this event? What did you think, feel, or do afterward?

Overall, how negative was this event? (1 = not at all.; 7 = very).....1 2 3 4 5 6 7

How important or personally significant was this event?.....1 2 3 4 5 6 7
(1 = not at all; 7 = very significant)

How did this event make you feel about yourself? (1 = very bad; 7 = very good).....1 2 3 4 5 6 7

How much did you control (manage and regulate) your emotions.....1 2 3 4 5 6 7
during the event? (1=not at all; 7=very much)

How did this event change your mood afterward?.....1 2 3 4 5 6 7
(1 = made it much worse; 4 = no change; 7 = made it much better)

Please consider the emotions you felt and expressed. For each emotion below, please rate first how much you experienced it internally. Then rate how much you expressed it externally. (1 = not at all; 7 = a great deal)

	<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>		<u>Experience</u>	<u>Express</u>
Amusement	_____	_____	Fear	_____	_____	Pride	_____	_____
Anger	_____	_____	Frustration	_____	_____	Sadness	_____	_____
Anxiety	_____	_____	Guilt	_____	_____	Shame	_____	_____
Contempt	_____	_____	Interest	_____	_____	Surprise	_____	_____
Disgust	_____	_____	Joy	_____	_____	Other:_____	_____	_____
Embarrassment	_____	_____	Love	_____	_____	Other:_____	_____	_____